State of California—Health and Welfare Agency Department of Health Services Toxic Substances Control Division Sacramento, California									
4	UNIFORM HAZARDOUS 1. GEN WASTE MANIFEST CAD		anifest Iment No.	2 Page	1 Informa Is not law.		the shaded areas red by Federal		
2	3. Generator's Name and Mailing Address Electronic Chrome Co., Inc. 9132 Dice Road, Santa Fe Springs, CA 90670 4. Generator's Phone (213) 946-6671			A. State Manifest Document Number 86570012 B. State Generator's ID CAD 008 391 427					
П	5. Transporter 1 Company Name				C. State Transporter's ID				
	Surfchem ICAD 980 645 707 Transporter 2 Company Name 8. US EPA ID Number			D. Transporter's Phone 714 534-4014 E. State Transporter's ID					
	9. Designated Facility Name and Site Address 10. US EPA ID Number			F. Transporter's Phone G. State Facility's ID					
	Casmalia Resources Ntu Road				<i>A 1) (-) 2 6</i> Ity's Phone	<u>) 18</u>	5/25		
	Casmalia, CA 99429	ICADI 020 1748 1125	12. Conta		937-84				
	11. US DOT Description (Including Proper Shipping Nam	e, Hazard Class, and ID Number)	No.	аіпега Туре	13. Total Quantity	14. Unit Wt/Vol	l. Waste No.		
GENER		NOS- NA 1789 Corrosive Material	CI 214	DFE	7.7000		Solid 241 D001		
A T O R					1				
	C.		7		1				

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

25%- Waste Muriatic Acid, Chrome, Hydrochloric 5%- Absorbant

15. Special Handling Instructions and Additional Information

Gloves and goggles

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

	minimizes the present and future threat to human health and the environment.							
1	Printad/Typed Name	Signature	Month Day Year					
,	17. Transporter 1 Acknowledgement of Receipt of Materials	The second secon						
i	Printed/Typed Name	Signature ()	Month Day Year					
	Danie A Howard	Drivelf Hoursel	1/10/210186					
2	18. Transporter 2 Acknowledgement of Receipt of Materials	7///						
	Printed/Typed Name	Signature	Month Day Year					
	19. Discrepancy Indication Space							

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name # 80/2/ 24/860/b Signature

Month Day Year

DHS 8022 A (11/85) (EPA 8700-22)

YELLOW: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

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_	1000	print or type. (Porm designed for use on ell	ite (12-prich) typewriter.)						Sacramento, California		
	L	UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No. CADI 1008 890 1497	I Docu	anifest ument No.	2. Pa	⁻ lis no	ation in t requ	the shaded areas ired by Federal		
H	3.	3. Generator's Name and Mailing Address A. State Manifest Document Nui						Number			
		Electronic Chrome Co., Inc. 9132 Dice Road, Santa Fe Springs, CA 90670 B. State Generator's ID]12				
H	4.	Generator's Phone (213) 946-6	671	3070		CAD 008 391 427 C. State Transporter's ID					
	5.	Transporter 1 Company Name		PA ID Numb	oer						
Н		Surfchem	CAD 980 50	45 1 7h 7	.		nsporter's Phon				
П	7.	Transporter 2 Company Name		PA ID Numb			de Transporter's		634-4014		
П		9. Designated Facility Name and Site Address 10. US EPA ID Number G, State Facility's ID				and the second control of the second control					
П	9.										
И	ľ	Casmalia Resources									
Ш	1	Ntu Road H. Facility's Phone									
		Casmalia CA 99429	المام احلما	عطماما							
П	Н	Gasmaila, CA 77427		48 L TIS	12. Contr		<u>5 937-84</u>	3. 94.4.1			
	11	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)			Total		Unit				
٦	a.				No.	Туре	Quantity	Wt/Vol	Waste IVU.		
JE ZE G		Hydrschloric Acid Mix	ture NOS- NA 1789 Corrosive Mat	erial	الم المرا الم	ी गोर ा	 12 7 22 211	1	Solid 241 D001		
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Н	J.	Additional Descriptions for Materials Listed	Above			K. Har	dling Codes for	Wastes	Listed Above		
	2 75	25%- Waste Muriatic Acid, Chrome, Hydrochloric 5%- Absorbant									
	12	Special Handling Instructions and Additions	Web-room								
		. Special Handing Instructions and Additions	ii information		•						
		Gloves and goggles									
	16	GENERATOR'S CERTIFICATION: I hereby dec	fere that the contents of this consignment	ont ore ful	ly and near		4	L			
	'"	proper shipping name and are classified, pa	cked, marked, and labeled, and are in a	ioni are full ill respects	in proper (rately (uescribed above on for transport b	oy Dy hiahw	_{IAV}		
		according to applicable international and na	tional government regulations.	F - 1					,		
		Unless I am a small quantity generator w under Section 3002(b) of RCRA, I also cer	ho has been exempted by statute or	regulation	from the	duty to	make a waste	minimiz	ation certification		
		nave determined to be economically pract	icable and I have selected the metho	d of treatr	nent, stora	ge, or	disposal current	iy avail	able to me which		
		minimizes the present and future threat to numan health and the environment.									
		Printed/Typed Name	Signature		Land Contract		A		Month Day Year		
4	4-	Transport of Administration	And Mark the second sec	<u> </u>	<u> </u>	100	The Country				
TRANSPORTER	17	Transporter 1 Acknowledgement of Receipt Printed/Typed Name			2			**********			
Ñ			Signature		91 1			<i>*</i>	Month Day Year		
8	_	David A Howard		1/7. mg/	14 MA	111	The Il		KI (18 KI)		
R	18	Transporter 2 Acknowledgement of Receipt		7	7 / V = =	b	-74-		, - ,		
E		Printed/Typed Name	Signature						Month Day Year		
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	19	Discrepancy Indication Space									
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Ţ	20	Facility Owner or Operator: Certification o	f receipt of hazardous materials cove	red by this	manifest	except	as noted in iter	n 19.			
		Printed/Typed Name	Signature		,				Month Day Year		
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